New Jersey Division of Revenue

CERTIFICATE of CHANGE of REGISTERED OFFICE &/or REGISTERED AGENT

(For Use by Domestic and Foreign, Profit and Non-profit Corporations)

CORPORATION NAMI	E:					
STATE OF ORIGINAL	INCORPORAT	ION:				
IMPORTAN	T - INCLUDE	INFORM	ATION ON BOTH THE	PRIOR AND NE	W AGENT	
PRIOR AGENT NAME:			NEW AGENT NA	NEW AGENT NAME:		
PRIOR AGENT STREET ADDRESS			NEW AGENT ST	NEW AGENT STREET ADDRESS		
CITY	STATE	ZIP	CITY	STAT	E ZIP	
				NJ		
			gistered office and the add m were authorized by res			
By (Signature of Officer)	ı		Title (Type)			
Date:						
NOTE - This form must corporation.	t be executed by	the chairm	an of the board, the presid	lent, or the vice pre	esident of the	
FEES: Change of Agent Name-\$25.00 Change of Agent Address-\$25.00 Change of Both-\$25.00				PO	Division of Revenue Box 308 nton, NJ 08625	
Make checks payable to:	TREASURER	STATE of	ENEW IERSEV (NO CA	SH DI EASE)		